## 510(k) Premarket Notification Sutter Medizintechnik GmbH Electrosurgical Cables 510(k) Summary

MAR 1 7 2008

November 27, 2007

The 510(k) summary of safety and effectiveness information is submitted in accordance with the requirements of SMDA 1990 and 1992.

Subject:

510(k) Summary of Safety and Effectiveness Information for the Sutter Bipolar

**Electrosurgical Cable** 

Submitter:

Sutter Medezintechnik GmbH

Tullastrasse 87

79108 Freiburg Germany

**Proprietary** 

Sutter Electrosurgical Cables

Name:

Common

Device

Electrosurgical Cutting and Coagulation Device and Accessories

Name and

(79GEI, §878.4400, Class II)

Classification:

Sutter Electrosurgical Cables are electrosurgical accessories designed to Description:

transfer electrosurgical power to monopolar and bipolar instruments from an

electrosurgical generator. The cables are designed to fit standard

monopolar/bipolar instruments and generator connectors. Sutter Electrosurgical Cables are supplied non-sterile, and can be reused after cleaning and steam

sterilization.

Intended Use:

To electrically connect monopolar/bipolar electrosurgical instruments to an

electrosurgical generator.

Test

Discussion:

Sutter Electrosurgical Cables presented in this submission are substantially

equivalent in design concepts, technologies and materials to their predicate devices. Sutter Electrosurgical Cables were validated through testing that supports the compliance of the devices to the Standards mentioned in Section

17 of this submission.

Test

Conclusion:

Sutter Electrosurgical Cables are substantially equivalent to their predicate devices in design concepts, technologies and materials. Testing demonstrates

that these devices are as safe, as effective, and perform as well as or better than

the legally marketed devices.



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Sutter Medizintechnik GMBH % Boone Interactive Mr. Thomas A. Boone Consultant 353 Loma Larga Road Corrales, New Mexico 87048

MAR 1 7 2008

Re: K073450

Trade/Device Name: Sutter Monopolar and Bipolar Electrosurgical Cables

Regulation Number: 21 CFR 878.4400

Regulation Name: Electrosurgical cutting and coagulation device and accessories.

Regulatory Class: II Product Code: GEI

Dated: February 21, 2008 Received: February 29, 2008

Dear Mr. Boone:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

## Page 2 – Mr. Thomas A. Boone

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Center for Devices and Radiological Health's (CDRH's) Office of Compliance at (240) 276-0115. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding postmarket surveillance, please contact CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at (240) 276-3474. For questions regarding the reporting of device adverse events (Medical Device Reporting (MDR)), please contact the Division of Surveillance Systems at (240) 276-3464. You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address <a href="http://www.fda.gov/cdrh/industry/support/index.html">http://www.fda.gov/cdrh/industry/support/index.html</a>.

Sincerely yours,

Mark N. Melkerson

Mark M Milken

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

## Indications for Use

510(k) Number (if known):	K073450	
Device Name:	Sutter Monopolar and Bipolar Electrosurgical Cables	
Indications for Use:	To electrically connect monopolar/bipolar electrosurgical instruments to an electrosurgical generator.	
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Prescription Use X (Part 21 CFR 801 Subpart D)	AND/OR Over-The-Counter Use (21 CFR 807 Subpart C	- )
(PLEASE DO NOT WRITE NEEDED)	BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF	
Concurren	nce of CDRH, Office of Device Evaluation (ODE)	_
	Vision Sign-Off)	
	ision of General, Restorative, Neurological Devices	
510	(k) Number K073450	